FILED

## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## Apr 10, 2001 8:00 am Secretary of State DOCUMENT # P98000050826 GLOBE CORP., INC 04-10-2001 90106 037 \*\*\*150.00 Principal Place of Business Mailing Address 3716 GATLIN PL CIRCLE 3716 GATLIN PL CIRCLE ORLANDO FL 32812 ORLANDO FL 32812 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-3522937 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required = 6. Name and Address of Current Registered Agent - ---- \_7. Name and Address of New Registered Agent\_ PEYTON, FRED J Street Address (P.O. Box Number is Not Acceptable) 3716 GATLIN PL CIRCLE ORLANDO FL 32812 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. CR2E034 (10/00) ☐ Addition Delete TITLE Change TITLE NAME PEYTON, FRED J NAME STREET ADDRESS STREET ADDRESS 3716 GATLIN PL CIRCLE CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32812 TITLE Delete TITLE. ☐ Change ☐ Addition NAME QUILTNER, IAN NAME STREET ADDRESS STREET ADDRESS 1343 NELSON CT CITY-ST-ZIP CITY-ST-ZIP ROCKLEDGE FL 32955 Delete . \_\_ ☐ Change ☐ Addition NÀME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address with all other-like empowered.